

## APPLICATION DATA SHEET

### Application Information

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?: None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?:

Computer Readable Form (CRF)?:: No

Number of Copies of CRF::

Title:: ADAPTIVELY INTERFACING WITH A DATA  
REPOSITORY

Attorney Docket Number:: 032881-004

Request for Early Publication?: No

Request for Non-Publication?: No

Suggested Drawing Figure:: 1

Total Drawing Sheets:: 11

Small Entity?: No

Latin Name::

Variety Denomination Name::

Petition Included?: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?: No

## **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Australia
Status::	Full Capacity
Given Name::	Michael
Middle Name::	John
Family Name::	SYKES
Name Suffix::	
City of Residence::	Aldgate, South Australia
State or Province of Residence::	
Country of Residence::	Australia
Street of Mailing Address::	34 Paratoo Road
City of Mailing Address::	Aldgate, South Australia
State or Province of Mailing Address::	
Country of Mailing Address::	Australia
Postal or Zip Code of Mailing Address::	5154
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Australia
Status::	Full Capacity
Given Name::	Daniel
Middle Name::	Seth
Family Name::	WEINSTEIN
Name Suffix::	
City of Residence::	Flemington Victoria
State or Province of Residence::	
Country of Residence::	Australia
Street of Mailing Address::	90 Edinburgh Street
City of Mailing Address::	Flemington Victoria

State or Province of Mailing Address::

Country of Mailing Address:: Australia

Postal or Zip Code of Mailing Address:: 3031

Address::

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Australia

Status:: Full Capacity

Given Name:: Jason

Middle Name:: Scott

Family Name:: BEER

Name Suffix::

City of Residence:: Hawthorne East, Victoria

State or Province of Residence::

Country of Residence:: Australia

Street of Mailing Address:: 840 Toorak Road

City of Mailing Address:: Hawthorne East, Victoria

State or Province of Mailing Address::

Country of Mailing Address:: Australia

Postal or Zip Code of Mailing Address:: 3123

Address::

### **Correspondence Information**

Correspondence Customer Number:: 21839

Phone Number:: (703) 836-6620

Fax Number: (703) 836-2021

### **Representative Information**

Representative Customer Number:: 21839

### Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

### Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
Australia	2002951909	10/04/02	Yes

### Assignee Information

Assignee Name:: Tenix Investments Pty Ltd  
Street of Mailing Address:: ACN 088 304 652 of Level 2, 100 Arthur Street  
City of Mailing Address:: North Sydney, New South Wales  
State or Province of Mailing Address::  
Country of Mailing Address:: Australia  
Postal or Zip Code of Mailing Address:: 2060